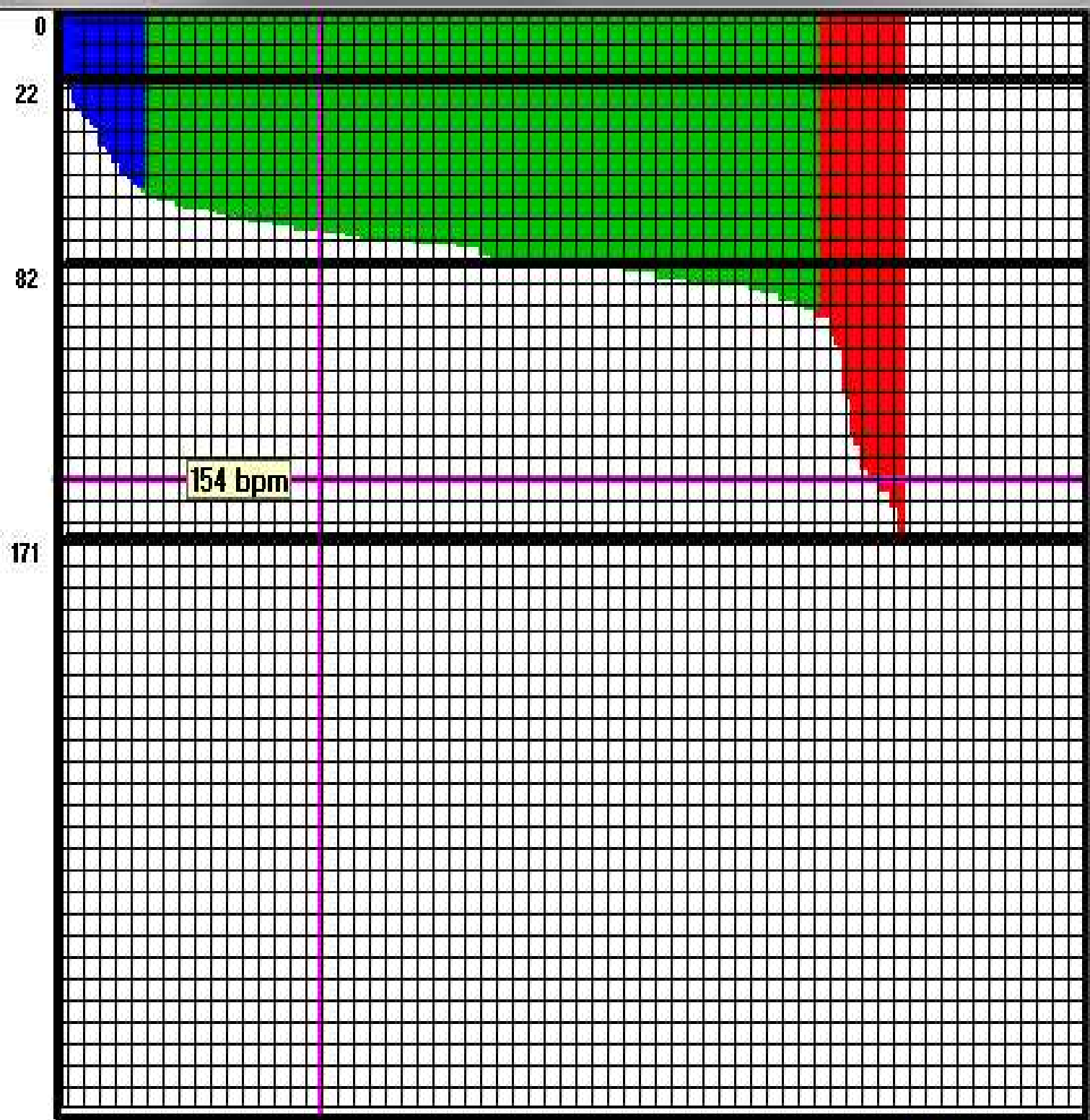


Duration = 17992 milliseconds

# Sequential Graphic Data

OK

- AR < 60
- AR 60-100
- AR > 100



Duration = 17992 milliseconds

# Sorted Graphic Data

OK

- AR < 60
- AR 60-100
- AR > 100

# Data Analysis

Duration = 17992 milliseconds

Total Beats = 226 beats

Min Heart Rate = 22 beats/min

Max Heart Rate = 171 beats/min

Mean Heart Rate = 82.29 beats/min

Variance = 578.6946

Standard Deviation = 24.05

**The rhythm is extremely irregular. AF Possible!**

# Chad2 Score Calculation in Non-valvular Atrial Fibrillation



Have you had Congestive Heart Failure recently (6mo)?

No

Do you have High Blood Pressure (Hypertension)?

No

Do you have Diabetes Mellitus?

No

Have you had a Stroke or TIA in the past?

No

Are you 75 years of age or older?

No

**Chad2 Score =**

**0**

**Adjusted Stroke Rate =**

**1.9**

per 100 patient years

**95% Confidence Interval =**

**1.2 - 3.0**



# Framingham Stroke Risk



Male or Female:

M

Cardiovascular Ds (y/n)

N

Age (years):

56

Atrial Fibrillation (y/n)

N

Systolic Blood pressure:

112

LVH on ECG (y/n)

N

Blood Pressure Rx (y/n)

N

Smoke cigarettes (y/n)

N

Diabetic (y/n):

Y

Calculate Risk

Save / OK

Cancel

**Total Point Score is: 3 from a maximum of 38**

**The 10 Year Probability for Stroke is 4%**

Stroke risk profile: adjustment for antihypertensive medication: the Framingham Study.

New evidence of stroke prevention. Scientific review.

Updated Risk Profile of D'Agostino et al for Stroke Risk Within 10 Years

# Diabetes Stroke Risk



Age (years):

Cholesterol mmol/L

Male or Female:

HDL Cholesterol mmol/L:

Smoke cigarettes (y/n)

Atrial Fibrillation (y/n)

How many yrs of Diabetes

Systolic Blood pressure:

**Cholesterol/HDL ratio:**

**The Diabetic's Stroke Risk = 0.3% in 5 yrs**

**The Diabetic's Stroke Risk = 0.9% in 10 yrs**

**The Diabetic's Stroke Risk = 4.6% in 20 yrs**

*Risk of stroke in type 2 diabetes estimated by the UK Prospective Diabetes Study Risk*

*Risk of Stroke in a Patient with Type 2 Diabetes Mellitus in the UKPDS*

# Transient Ischemic Attack (TIA) Risk of Stroke



Age (years)	<input type="text" value="56"/>	Weakness with TIA?	<input type="text" value="N"/>
Diabetic (y/n):	<input type="text" value="Y"/>	Trouble Speaking TIA?	<input type="text" value="Y"/>
TIA Longer than 10 min?	<input type="text" value="Y"/>		

Calculate Risk

Save / OK

Cancel

**TIA Score = 3 from a maximum of 5**

**Risk of Stroke within 90 days is 11%**

Short-term prognosis after Emergency Department diagnosis of TIA

Short Term (90 Day) Risk of Stroke in Patients with Transient Ischemic At [medal.org](http://medal.org)

# Elderly Bleeding Risk with Warfarin



Age (years):	<input type="text" value="56"/>	Alcohol / Drug Abuse?	<input type="text" value="Y"/>
Male or Female:	<input type="text" value="F"/>	Diabetes?	<input type="text" value="Y"/>
Bleeding in the past?	<input type="text" value="N"/>	Anemia (Hct < 30)?	<input type="text" value="Y"/>
Bleeding recently?	<input type="text" value="Y"/>	Antiplatelet Meds?	<input type="text" value="Y"/>

Calculate Risk

Save / OK

Cancel

**The Risk Score for Bleeding in this 56 yo F is: 2.78**

**The Risk Score range is between 0 - 4.17.**

**The Risk of Bleeding is HIGH.**

Development of a contemporary bleeding risk model for elderly warfarin recipients

Bleeding Risk Model of Shireman et al ([medal.org](http://medal.org))

# Adjustment of Warfarin Dosage

X

Today's INR:

Desired INR:

Present Warfarin Dosage:  mg

Adjust Dosage

New Dosage:  mg Warfarin

Followup

Save / OK

Cancel

Computer control of anticoagulant dose for therapeutic management

Prospective comparative study of computer programs used for management

Dosing Algorithm of Ryan et al ([medal.org](http://medal.org))

# Initiation of Warfarin Dosage



Day #1: If  $INR < 1.4$  then give 10mg Warfarin by mouth at 5PM.

(Usually day #3 Heparin)

Day #2: Check INR at 9AM or 16 hours after first dosage.

INR

1

Day #2 Warfarin Dosage

10.0

mg at 5PM

Day #3: Check INR at 9AM or 16 hours after second dosage.

INR

1

Day #3 Warfarin Dosage

10.0

mg at 5PM

Day #4: Check INR at 9AM or 16 hours after second dosage.

INR

3

Day #4 Warfarin Dosage

4.0

mg at 5PM

Commentary

Save / OK

Cancel

Flexible induction dose regimen for warfarin and prediction of maintenance dose.

Induction and Maintenance Dosing of Oral Anticoagulants Using the Method of Fennerty et al

# The Outpatient Bleeding Risk Index



Age (years):

56

Anemia (Hct < 30)?

Y

History of Stroke?

N

Kidney Failure (cr >1.5)?

Y

History of GI bleeding?

N

Diabetes?

N

Recent Heart Attack?

N

Calculate Risk

Save / OK

Cancel

You have a total of 1 from a possible maximum of 4.

You have a **INTERMEDIATE** Risk for Major Bleeding of  
5% in 3 Months and 12% in 12 months.

The outpatient bleeding risk index

The Outpatient Bleeding Risk Index of Beyth et al ([medal.org](http://medal.org))